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Image# NOTIFICATION OF MULTICANDIDATE STATUS

(See reverse side for instructions) This form should be filed after the Committee qualifies as a multicandidate committee. 1. (a) NAME OF COMMITTEE IN FULL Novo Nordisk Inc. Political Action Committee (b) Number and Street Address 500 New Jersey Ave. NW 2. FEC IDENTIFICATION NUMBER C00424838 Ste 350 (c) City, State and ZIP Code TYPE OF COMMITTEEcheck one) ☐ STATE PARTY Washington DC 20001 I certify that **one** of the following situations is correct (complete line 4 or 5): **STATUS BY AFFILIATION:** The committee submitted its Statement of Organization (FEC FORM 1) and simultaneously qualified as a multicandidate committee through its affiliation with: Committee Name: -FEC Identification Number: STATUS BY QUALIFICATION: 5. (a) candidates: The committee has made contributions to the five (5) federal candidates listed below (ONLY state party committees may leave this blank.): Office Sought State/District Name Date (i) Bob Etheridge for Congress Comm. NC 02 09/29/2006 House (ii) DE Castle Campaign Fund House 01 10/19/2006 (iii) Diana Degette for Congress Inc. House CO 01 10/19/2006 (iv) Friends of Mike Ferguson 10/19/2006 House NJ 07 (v) Murtha for Congress Committee House PA 12 10/19/2006 Contributors: The committee received a contribution from its 51st contributor 11/03/2006 Registration: The committee has been registered for at least 6 months. FEC FORM 1 was submitted on: 05/26/2006 (d) Qualification: The committee met the above requirements on: I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct, and complete. TYPE OR PRINT NAME OF TREASURER SIGNATURE OF TREASURER DATE Electronically Filed by 01/31/2007 Michael Mawby Michael Mawby Note: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 437g.

For further information contact:
Federal Election Commission, Washington, DC 20463
Toll-free 800-424-9530
Local 202-694-1100

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

FEC FORM 1 M